

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733910

FILED
Jan 17, 2007
Secretary of State

Entity Name: NEW PORT CLUB OF VERO BEACH, INC.

Current Principal Place of Business:

2536 16TH AVE.
VERO BEACH, FL 32960 US

New Principal Place of Business:

Current Mailing Address:

2536 16TH AVE.
VERO BEACH, FL 32960 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DELGROSSO, PAUL J
445 61ST AVE.
VERO BEACH, FL 32968 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: LEDUC, SUSAN
Address: 1655 29TH AVE.
City-St-Zip: VERO BEACH, FL 32960

Title: TD () Delete
Name: DELGROSSO, PAUL J
Address: 445 61ST AVE.
City-St-Zip: VERO BEACH, FL 32968

Title: PD () Delete
Name: KIRBY, ROBERT K
Address: 4185 1ST STREET S.W.
City-St-Zip: VERO BEACH, FL 32968

Title: VD () Delete
Name: SANDERS, ROBERT
Address: 1100 PONCE DE LEON CIRCLE W109
City-St-Zip: VERO BEACH, FL 32960

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: GAULT, BARBARA
Address: 358 GROVE ISLE CIRCLE
City-St-Zip: VERO BEACH, FL 32962

Title: PD (X) Change () Addition
Name: DELGROSSO, PAUL J
Address: 445 61ST AVE.
City-St-Zip: VERO BEACH, FL 32968

Title: VD (X) Change () Addition
Name: FROST, DONALD
Address: 3009 SE OVERBROOK DRIVE
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: TD (X) Change () Addition
Name: SANDERS, ROBERT
Address: 1100 PONCE DE LEON CIRCLE W109
City-St-Zip: VERO BEACH, FL 32960

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL J. DELGROSSO

PD

01/17/2007

Electronic Signature of Signing Officer or Director

Date